

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/937628 FILING DATE
APPLICANT(S)

		AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
		IND.	DEP.	IND.	DEP.	IND.	DEP.		
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* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS